





TREATMENT PROTOCOL: GENERAL TRAUMA *

1. Basic airway
2. Spinal immobilization prn: do not delay transport of hypotensive patients with penetrating torso trauma in order to apply spinal immobilization.
3. Control bleeding – with direct pressure, if unsuccessful, utilize tourniquets and/or hemostatic agents ③
4. Pulse oximetry
5. Oxygen prn
6. Advanced airway prn
7. Apply 3-sided dressing to sucking chest wounds if indicated
8. If tension pneumothorax suspected and systolic blood pressure less than 80mmHg, remove dressing and consider needle thoracostomy ①
9. Venous access en route
Poor perfusion:
Normal Saline Fluid Challenge
250ml one time
 **Pediatric:** 20ml/kg IV
See Color Code Drug Doses/L.A. County Kids ⑦
10. Blood glucose prn
11. Cardiac monitor prn: document rhythm and attach ECG strip if dysrhythmia identified, treat dysrhythmias by the appropriate protocol
12. Splints/dressings prn, treatment for specific extremity injuries:
 - Poor neurovascular status – realign and stabilize long bones
 - Joint injury – splint as lies
 - Midshaft femur – splint with traction
13. Consider other protocols for altered level of consciousness with possible medical origin: Ref. No. 1243, Altered Level of Consciousness; Ref. No. 1247, Overdose/Poisoning (Suspected)
14. If evisceration of organs is present, apply moist saline and non-adhering dressing, do not attempt to return to body cavity
15. For pain management:
Fentanyl ②③⑥
50mcg slow IVP, titrate for pain relief, do not repeat
50-100mcg IM/IN one time
 **Pediatric:** 1mcg/kg slow IV push, do not repeat
1mcg/kg IM one time
1.5mcg/kg IN one time
Morphine ②③⑥
2-4mg slow IV push, titrated to pain relief maximum 8mg
 **Pediatric:** 0.1mg/kg slow IV push
See Color Code Drug Doses/L.A. County Kids ⑦
Do not repeat pediatric dose, maximum pediatric dose 4mg
16. **CONTINUE SFTP or BASE CONTACT ④⑤**
17. If pain unrelieved,
Fentanyl ②③⑥
50-100mcg slow IV push, titrate to pain relief
May repeat every 5min, maximum total adult dose 200mcg
50-100mcg IM/IN one time
 **Pediatric:** 1mcg/kg slow IV push (over 2 minutes)
May repeat every 5min, maximum pediatric dose 50mcg
1mcg/kg IM one time
1.5mcg/kg IN one time See Color Code Drug Doses/L.A. County Kids ⑦

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Morphine ②③

2-12mg slow IV push, titrate to pain relief

May repeat every 5min, maximum total adult dose 20mg

18. If continued poor perfusion:

Normal Saline Fluid resuscitate

IV fluid administration in 250ml increments until SBP is equal to or greater than 90mmHg or signs of improved perfusion



Pediatric: 20ml/kg IV

See Color Code Drug Doses/L.A. County Kids ⑦

SPECIAL CONSIDERATIONS

- ① Indications for needle thoracostomy include unilateral breath sounds and profound hypotension (SBP equal to or less than 80mmHg) with one or more of the following:
 - Altered mental status
 - Severe respiratory distress
 - Cyanosis
 - Shock
 - Cool, pale, moist skin
- ② Use with caution: in elderly; if SBP less than 100mmHg; sudden onset acute headache; suspected drug/alcohol intoxication; suspected active labor; nausea/vomiting; respiratory failure or worsening respiratory status
- ③ Absolute contraindications: Altered LOC, respiratory rate less than 12 breaths/min, hypersensitivity or allergy
- ④ Base hospital contact must be established for all patients who meet trauma criteria and/or guidelines; generally, this is the designated trauma center. SFTP providers may call the trauma center directly or establish base contact if transporting the patient to a non-trauma hospital.
- ⑤ Receiving Hospital Report
 - Provider Code/Unit #
 - Sequence Number
 - Age/Gender
 - Level of distress
 - Mechanism of Injury/Chief Complaint
 - Location of injuries
 - Destination/ETA

If patient meets trauma criteria/guidelines/judgment:

 - Regions of the body affected
 - Complete vital signs/Glasgow Coma Scale (GCS)
 - Airway adjuncts utilized
 - Pertinent information (flail segment, rigid abdomen, evisceration)
- ⑥ Ondansetron 4mg IV, IM or ODT may be administered prior to fentanyl or morphine administration to reduce potential for nausea/vomiting
- ⑦ If the child is off the Pediatric Resuscitation tape and adult size, move to the Adult protocol and Adult dosing
- ⑧ Hemostatic agents are for use by approved providers only